Massachusetts Department of Agricultural Resources Dairy Farmer Tax Credit Program 2010 Monthly Milk Production Report

							sclose your monthly milk	
							ources. An Eligible Taxpayer	
							ing month except for the month	
of Decei	mber, which sha	all be subn	nitted not later than the	fifteenth of	lay of January	This	form may be faxed or emailed.	
Name:					Farm Name:			
Certificate of					Phone			
Registration Number:					Number:			
Name(s) of cooperative or handler				l.	Producer			
who markets or purchases milk:				Number:				
			le milk production incl					
							er a suspended or revoked	
	•				•		ilk handler, please provide	
		arketable r	nilk. Complete the mil	k producti	on schedule be	elow or	attach a separate sheet showing	
the same	e information.							
			Calendar Year 2010	Eligible I	Production (Po	unds)	1	
			Calcilual Teal 2010	Eligible	rioduction (Fo	unus)		
		January						
		,						
		February						
		M 1						
		March						
			April					
			1					
			May					
			T				-	
			June					
			July				•	
			Í					
			August					
			G 1				-	
			September					
			October				1	
			November					
							_	
			December					
			Total				1	
			1041					
				•			•	

Send completed forms to:

Laura J. Maul
Massachusetts Department of Agricultural Resources
Attn: Massachusetts Dairy Farmer Tax Credit Program

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Phone: 617-626-1739 Fax: 617-626-1850

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